



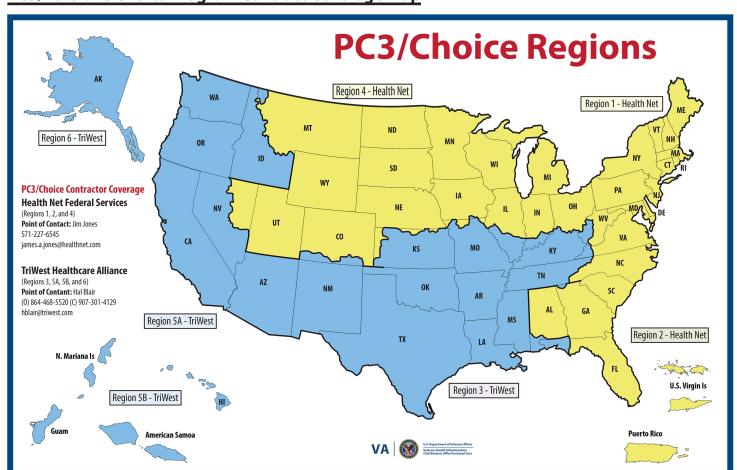
How to become a Veterans Choice Program and/or Patient-Centered Community Care Provider

VA Community Care Fact Sheet for Interested Providers

On August 7, 2014, the President and Congress enacted the Veterans Access, Choice, and Accountability Act of 2014, which directed the establishment of the Veterans Choice Program to improve access to care and to meet the short-term health care needs of our Nation's Veterans. Under the Veterans Choice Program, eligible Veterans have the ability to receive VA health care in their communities rather than waiting for a VA appointment or traveling to a VA medical facility. The Veterans Choice Program does not impact existing VA health care or any other Veteran benefits. For additional information on the Veterans Choice Program, including eligibility criteria, please visit the *Veterans Choice Program website* (http://www.va.gov/opa/choiceact/index.asp)

VA has expanded its Patient-Centered Community Care (PC3) contracts with Health Net Federal Services and TriWest Healthcare Alliance to include implementing the Veterans Choice Program. PC3 is a VA nationwide program to provide eligible Veterans access to certain medical care when the local VA medical facility cannot readily provide the care due to lack of an available specialist, long wait times, geographic inaccessibility, or other factors. PC3 has been the VA method of purchasing care in the community. The Veterans Choice Program supplements PC3 and allows coverage for more services for eligible Veterans and provides Veterans more flexibility in their choice to receive care in the community or through VA.

PC3/Veterans Choice Program Contract Coverage Map



PC3 and/or Choice Program Network of Providers

- All PC3 providers are automatically eligible to participate in the Veterans Choice Program
- If a provider is interested in becoming a PC3 provider, they must establish a contract with one of the Veterans Choice Program contractors, Health Net or TriWest
 - The Veterans Choice Program contractor and provider must have an agreed upon reimbursement amount
- If a provider is not interested in becoming a PC3 provider, but wants to become a Veterans Choice Program provider, they must establish a provider agreement with Health Net or TriWest
 - Providers must accept Medicare rates
 - Providers must meet all Medicare Conditions of Participation and Conditions for Coverage as required by the U.S. Department of Health and Human Services
 - » See the **Conditions for Coverage and Conditions of Participation page** for further detail (http://www.cms.gov/Regulations-and-Guidance/Legislation/CFCsAndCoPs/index.html)
 - Any provider on the Centers for Medicare and Medicaid Services (CMS) exclusionary list shall be prohibited from network participation.
 - » See the Office of Inspector General Exclusions page for further detail (http://oig.hhs.gov/exclusions/index.asp)
 - All services, facilities, and providers shall be in compliance with all applicable federal and state regulatory requirements
 - All providers shall have a full, current and unrestricted license in the state where the service(s) are delivered and must have same or similar credentials as required by VA staff
 - Providers must submit a copy of the medical records to the TPA for the medical care and services provided to the Veteran for inclusion in the Veteran's VA electronic record

Contact information for Health Net:

- Provider Customer Service Phone Number: 1-866-606-8198, Option 2
- Email: HNFSProviderRelations@Healthnet.com
- Website: Join Our Network (https://www.hnfs.com/content/hnfs/home/va/home/provider/options-for-providers.html)

Contact information for TriWest:

- Provider Services Contracting: 1-866-284-3743
- Email: TriWestDirectContracting@triwest.com
- Website: Join Our Provider Network (https://www.triwest.com/provider)